

Medical Cannibalism: The Morality of Using Vaccines Generated from Aborted Fetal Tissue

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by
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"Childhood vaccination is against our religious beliefs." While this statement is associated with religious groups like the Jehovah's Witnesses, it may become much more common due to two relatively recent vaccines: Varivax and Maruvax II. Both vaccines were generated through the use of fetal tissue obtained through surgical abortion. The use of such viral vaccines poses a serious moral challenge. Can the health interests of a living child be weighed against a child whose death is an accomplished fact, when the murderer promises to kill no more children - in fact, he promises to use the wealth derived from the murder to keep your child, and thousands like her, alive?

While fetal tissue harvesting and research are widely discussed, a more insidious moral dilemma remains unmentioned: the use of fetal tissue obtained from abortion and used to generate vaccines. Is it morally licit to use such vaccines? This issue demonstrates the moral situation is at its most extreme. The child whose tissues have been harvested has been dead several decades. Unlike front-page experiments in the macabre, the medical treatments being derived from these tissues are neither speculative nor rank failures - the vaccines work. Lives will be preserved and not just yours. The lives preserved are even more precious to you than your own - they are the lives of your children. We have only to accept the terms.

The arguments surrounding such vaccines are thus the acid test of the right-to-life movement. The problems involved have led astray even well-catechized, well-meaning Catholics. Within the last five years, two different groups of Catholic ethicists have found the use of these vaccines to be moral, largely through subtly flawed analogies. Note carefully: the ethical problems discussed here only arise with a class of vaccines generated for use against certain viral diseases. Vaccines generated against bacterial disease do not have the same ethical problems. In order to understand why this is so, we need to re-visit our high school biology.

Why Fetal Tissue is Used

In order to produce a bacterial or a viral vaccine, laboratory personnel must have large quantities of the bacterium or virus in question. Fortunately, bacteria can be grown in large quantities simply by giving them the equivalent of chicken broth. Unfortunately a virus, a simple strand of DNA or RNA, isn't as capable. A virus needs cellular machinery, machinery it doesn't have, in order to reproduce. It must insinuate itself into a cell, hijacking the cell's machinery. To grow large quantities of virii, a tissue culture, essentially a vast "lawn" of cells which coat the inside of the flask like scales on a fish, must be prepared. The virus is placed in contact with the cell tissue, invades the cells, hijacks the cellular machinery, and reproduces itself. After large numbers of viruses have grown, they are removed from the cell culture, inactivated, and processed in order to produce the vaccine.

The problem: viruses need good cells to hijack. The cells must provide excellent machinery for virus production, and be easy for the virus to invade. Two human cell lines used to produce cell cultures, WI-38 and MRC-5, have problematic origins. WI-38 is normal lung tissue taken from a three-month old female child aborted in Philadelphia in 1961. MRC-5 is normal

lung tissue taken from a 14-week old male child aborted because a Swedish couple wanted no more children. Both cell lines support a broad range of rhinoviruses. Both are “immortal,” which means they reproduce rapidly and self-consistently enough to remain essentially similar to the tissue taken from two dying bodies over thirty years ago.

Current Moral Analyses

Two vaccines generated using viruses grown in these cell lines are Merck and Co.’s Varivax, a chicken-pox vaccine, and Maruvax II, for rubella. Catholic ethicists have analyzed the morality of these vaccines at least twice in the last five years; once in an October 1994 briefing paper issued through the English Bishops’ Catholic Media Office (EBCMO), and again in July 1997, by Daniel Maher, Director of Publications of what was then called the Pope John Center in Braintree, Massachusetts, at the request of Denver’s Archbishop Charles Chaput. Though somewhat different, both arguments reach the same conclusion: the vaccines are morally licit. Both opinions clearly find abortion reprehensible, and both struggle to provide a just response. However, neither analysis is morally binding, and both are subtly flawed.

Both lines of reasoning are founded on the nature of the seminal event: since the cell lines are immortal, no further abortions are needed in order to generate more cells. Thus, the evil act which procured the tissues is complete and sufficiently remote from the present use of the tissues that whoever uses the vaccine today is not morally complicit in the original abortion. That is, using the vaccine won't prevent the historical abortion, vaccine generation doesn't require more abortions today or in the future, so there is no attachment to the sin of abortion.

Two analogies are used to support this argument. The first rests on the use of data from Nazi death-camp experiences. German doctors froze prisoners to death in tanks of ice water in

order to learn how to treat hypothermia. Though they failed to find a treatment, their data was eventually captured by Allied troops. Allied doctors developed information based on that data which is used today in the treatment of hypothermia. Since this use of illicitly collected data was moral, it is also acceptable to use illicitly collected fetal tissue.

Unfortunately, the comparison fails. First, the use of data is substantially different from the use of tissue. Second, no one argues that present hypothermia treatments show Nazism and Nazi experiments were not really evil, nor is anyone arguing that the current use of the Nazi data justifies undertaking similar experiments today. However, fetal tissue research, transplants, and products are quite often used to justify abortion. Third, the profits and data obtained from that research allows society to assume the method of obtaining fetal tissue is, if not completely moral, at least not particularly relevant.

Thus, the Nazi murderers reap neither monetary benefits from their evil nor an enhanced reputation from the use of the hypothermia data, and, most important, they gain no emulators on the basis of their work. However, the abortion industry is reaping both monetary benefits and an enhanced reputation from the use of this tissue, and they have gained quite a few emulators. Furthermore, the abortion industry and society uses contraception and abortion to structure a eugenic biomedical agenda essentially similar to that of the original Nazi regime. The unwanted members of society, whether they be children in the womb, the poor unable to afford medical care, or the aged, useless in a consuming, producing society, are being systematically killed or pressured into suicide. Ironically, Nazi ideology is reaping the benefits of an enhanced reputation through the use of fetal tissue for biomedical purposes.

The second analogy compares the use of fetal tissue to that of a murdered organ donor. It is morally acceptable to use an organ harvested from someone who has been murdered. Since the

manner of death is not relevant to the ability to donate organs, tissue harvesting is called morally acceptable.

However, organ donation is a freely willed act. Organs can be harvested from an individual only if and as the individual stipulates. Thus, the donor may give permission only to remove her corneas, she may permit organ harvesting only if she dies naturally, or she may forbid harvesting entirely. The patient's pre-established will rules how her organs will be handled, not the manner of death. Her will must be positively established, or no donation can take place at all. Clearly, the child's will in regard to her tissues cannot be established. While a parent has the right to decide how to dispose of her dead child's organs, this right presupposes the parent has not brought about the child's death.

Neither analysis considers a more closely-related example: enforced cannibalism. The use of tissue to generate vaccines which may save other's lives is a kind of cannibalism. On October 13, 1972, a plane with 40 people aboard, all Catholic, crashed in the Andes. Due to the total lack of food in the snowy wasteland, the survivors of the crash were forced to eat the bodies of those who had died in order to maintain their own life. The Church ruled the cannibalism to be acceptable in this instance, because the bodies of the slain were treated with great reverence and the need for sustenance was life-threatening. While it is true that most of those whose bodies were eaten had not given their consent, it is also true that none were murdered; their deaths were unforeseen and unpreventable. By removing the issue of will, this example better corresponds to the abortion event, while simultaneously highlighting the moral problem: the manner of death and the reverence due the human body in death must be considered.

Another argument asserts the separation of the cells from the living being to which they once belonged gives the tissue a different, independent life. While technically true, it doesn't

address how the tissue came to have this status. In May 1973, at a combined meeting of the American Pediatric Society and the Society for Pediatric Research held in San Francisco, California, Dr. Peter Adam and associates described their experiment on fetal brain metabolism. The putative scientists aborted babies between 12 and 21 weeks gestation and cut their heads off. The heads were kept alive in a nutrient solution in order to study the brain tissues' uptake of nutrients. Using the above argument, the living brains in the severed heads could morally be used to generate the viruses necessary for vaccine production because those brains have a life which is now different from and independent of their origin, the living child. Though this example merely substitutes brain tissue for lung tissue and skulls for test-tubes, few could look the living skull in the eye and call the products derived from the living brain within morally licit for use.

Researchers' Moral Culpability

In fact, there is a further problem, which none of the above analyses address. Who owns an immortal cell line? In October, 1976, UCLA Medical Center, while treating John Moore's hairy-cell leukemia, discovered his T-lymphocytes had unique properties and harvested them, establishing a new cell line without his knowledge. The cell line turned out to be quite valuable. Moore found out and sued, claiming a right to part of the profits. Although he lost, the court found his doctor failed in his fiduciary duty towards Moore. Three elements were present: (a) the patient was being treated for an illness (b) the patient survived the treatment (c) the cells were taken without the patient's consent, thus the courts found these researchers violated the patient's right to informed consent. Certainly the aborted child was not being treated for an illness, did not survive the treatment, did not consent to the harvesting of the cells, nor was he informed of what

the researchers would do with those cells. By every one of the court criteria, the researchers who established the immortal cell line obtained the tissue dishonestly.

But what is the moral culpability of the cell-line researchers or the pharmaceutical researchers? It seems unlikely the tissue is licit. The children's consent was not obtained, and the only individuals who could have given such consent, i.e., the parents, or just possibly the physician, lost their this right by their collusion in the children's death. How culpable are the researchers for these deaths?

It has been argued the pharmaceutical researchers bear no culpability: the tissue for the cell line could, in principle, have come from a natural miscarriage. This is a variation of the cannibalism argument; just as the Andes plane crash survivors were forced by circumstances to eat their dead companions, so the researchers were forced by circumstances to use aborted fetal tissue to generate a vaccine. Yet, while chicken pox/rubella can be deadly diseases under the right circumstances, the two situations hardly seem equivalent. Even if we grant such an equivalence, are the researchers innocent bystanders? They could make such an argument. In 1992, the National Institutes of Health successfully lobbied President Clinton to repeal the federal funding ban on the use of tissue from surgical abortion precisely because miscarriages were not providing enough suitable tissue for continued research. Researchers, pointing to this, could claim it proves surgically aborted children were their only real source of tissue. Sadly, this means the pharmaceutical researchers depended on an intrinsically evil act, making the vaccine morally illicit.

Cell-line researchers collude with abortionists in order to get tissue. Researchers require living tissue, as fresh as possible; dead and dying tissue is useless. Getting living fetal tissue requires extraordinarily close cooperation between the researcher and the abortionist. In fact, the

researcher is often at the foot of the table while the abortion is being performed, immediately dissecting the child. Typically, published scientific papers on fetal tissue research list the abortionist who supplies the fetal tissues as a co-author; without the close cooperation of the abortionist, the paper wouldn't have been possible.

Thus, little independence exists between the cell-line researcher and the abortionist. Even if the aborted tissues were simply shipped to the lab by the abortionist, money and/or a positive social acceptance of abortion will be given in exchange for the tissues. The abortionist will not be dissuaded from his evil act, he will be encouraged to continue it; indeed, the abortionist intends the act of supplying tissue to spread social acceptance of abortion. Similarly, we encourage researchers to support abortionists when we support work based on aborted fetal tissue. The Nazi data could be used precisely because there was no danger of such material cooperation; insofar as the possibility of such cooperation exists, the use of the Nazi data is proscribed.

“Immediate material cooperation” is complicity in an action which one does not formally approve, but in which one is so closely involved that one shares its evil. The cell-line researchers were almost certainly immediate material cooperators. Pharmaceutical researchers made no effort to avoid the morally problematic cell line, and thereby spread the effect of the abortionists' evil intent. While using the vaccine is not identical to attending the abortion, using products derived from the living tissues of a murdered child is uncomfortably close to immediate material cooperation with the vaccine generators.

Conclusions

Using such vaccines institutionalizes the link between pharmaceuticals and abortion. This effect was callously disregarded by Merck and Co. even if it wasn't actually intended. Given the lack of equally effective vaccines based on alternative, non-problematic cell lines, their intent is suspect. In a free market one would expect non-abortion related vaccine cell-lines to be available. None are. Either aborted tissue is intrinsically necessary to such vaccine production, or we must seriously question the ethics of pharmaceutical companies. *Donum Vitae* states: "The corpses of human embryos and fetuses, whether they have been deliberately aborted or not, must be respected just as the remains of other human beings.... the moral requirements must be safeguarded, that there be no complicity in deliberate abortion and that the risk of scandal be avoided. Also, in the case of dead fetuses, as for the corpses of adult persons, all commercial trafficking must be considered illicit and should be prohibited." The cell-line researchers are complicit in abortion. Merck and Co. commercially exploit the results of this complicity. Thus, *Donum Vitae* is violated.

It is irrelevant that the abortion is a one-time long-since completed event. A rape-murder committed in 1961 is also a one-time long-since completed event, but it is still immoral to buy the film of the event for one's own enjoyment. Buying goods produced by apartheid or slave labor is not moral even if the crime which produced the item is a completed action, with the slaves now dead. Using the product encourages slavers. Using the vaccine encourages the abortion industry.

Even if chicken-pox or rubella were uniformly deadly diseases, the danger posed to the public health by refusing this vaccine is irrelevant. If a serial killer auctioned off his victims' property we must refuse to buy that property, regardless of the danger to the public economy. In

the same way, we cannot be complicit in serial killing practiced by scientists. A murderer cannot be allowed to justify the act of murder by donating his victim's organs. He does not gain rights over the body of his quarry simply by virtue of having swung the killing blow. Neither does a society complicit in abortion have a right to apportion the victim's body in ways which benefit itself, while muttering, "Well, she's dead now, and we can't let the body go to waste." Drug companies use these cell lines because the cell lines make money. The cell lines will only be discarded when market pressures demonstrate they do not make money.

Assume someone learns the inheritance on which he lives was given to him on the basis of a false will, designed to deprive the rightful heirs of their money. The person who has benefited from the injustice must attempt to rectify the situation. Likewise, Merck and Co. has a duty publicly to renounce the abortion and all profits accruing therefrom. The problem of scandal derives precisely from the fact that it encourages others to sin or to continue in their sin. We cannot avoid participating in scandal if we provide no incentive for the sinners to change. Public use of the vaccines will not cause Merck and Co. or the abortionists to change their behaviour. In fact, derived profits encourages their continued fetal tissue efforts in other avenues of research. They experience no downside. Is not this very fact scandalous?

The arguments supporting the morality of these vaccines do not stand up to scrutiny. Refusing to use these vaccines involves physical risk for ourselves, for our children, and for society. But their use poses an even greater risk to a just society. The widespread use of contraception has led inexorably to abortion, euthanasia and infanticide. Where might the widespread use of tissue taken from surgically aborted children lead us? Do we really want to find out?